

**Senate Bill 521 Health Insurance - Material Changes to Provider Networks -
Notification and Special Enrollment Period**

Finance Committee

March 4, 2026

Position: FAVORABLE

Mental Health Association of Maryland (MHAMD) is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health (MH) and substance use disorders (SUD). We appreciate the opportunity to provide this testimony in support of Senate Bill 521.

Among other provisions, SB 521 requires health insurance companies to notify enrollees when their behavioral health provider is no longer a part of their coverage network and of the enrollee's right to continue receiving services from that provider for 90 days after termination from the insurance company's panel.

The Maryland General Assembly and the Maryland Insurance Administration have taken important steps over the years to address network adequacy concerns and improve access to treatment for individuals with mental health and substance use disorders. And while progress is being made, it is still not guaranteed that Marylanders with commercial insurance can access in-network behavioral health care when needed.

According to an [independent national report](#)¹ published in April 2024, Marylanders are nearly nine times more likely to go out-of-network for behavioral health care versus primary care, a rate that is twice the national average and fourth worst in the nation. Given the challenges in finding an in-network behavioral health provider, insured Marylanders deserve to be notified quickly when their existing provider has been terminated from their insurance company's panel and of their right to keep seeing that provider for a limited duration so they have a reasonable opportunity to identify a new in-network provider or make other arrangements to prevent a disruption in their care.

For these reasons, MHAMD supports SB 521 and urges a favorable report.

¹ Mark, T. L., & Parish, W. J. (2024). Behavioral health parity – Pervasive disparities in access to in-network care continue. RTI International.

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